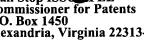
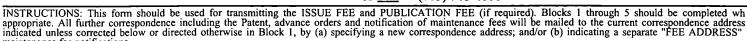
## PART B - FEE(S) TRANSMITTAL

applicable fee(s), to: Mail Complete and send this form, together w

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(703) 746-4000 or Fax



appropriate. All further colindicated unless corrected imaintenance fee notification	below or directed otherwise	in Block 1, by (a	specifying a	new correspondence address	s; and/or (b) indicating a sep	arate "FEE ADDRESS"
	ÉT, NW		T ZEE T T T T T T T T T T T T T T T T T	Fee(s) Transmittal. T papers. Each addition have its own certifica Ce I hereby certify that to States Postal Service	f mailing can only be used this certificate cannot be used that paper, such as an assignmente of mailing or transmission.  Intertificate of Mailing or Transmits Fee(s) Transmittal is bein with sufficient postage for fail Stop ISSUE FEE address PTO (703) 746-4000, on the	for any other accompany ent or formal drawing, m smission g deposited with the Un rest class mail in an envel
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APPLICATION NO.	FILING DATE	FIRST NAMED IN		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO		_\$1379 <b>\$1.</b> 4		\$300	_\$1670 _ \$1,700	02/22/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	]	
GARCIA, JOANNIE A 282				438-612000	_	
CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 on Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  adata will appear on the patent. If an assignee is identified below, the document has been filed of a substitute for filing an assignment.			
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Oki Electric Industry Co., Ltd. Tokyo, Japan						
		ries (will not be pri	inted on the pate	ent): 🗖 Individual 🚨 C	Corporation or other private gr	oup entity Governm
a. The following fee(s) are	enclosed:	4b	. Payment of Fe	( )		
Issue Fee	mall entity discount permitte	ad)		the amount of the fee(s) is en		
Advance Order - # of	•	•	Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 18-0002 (enclose an extra copy of this form).			
a. Applicant claims SI	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.			LL ENTITY status. See 37 C	
The Director of the USPTO NOTE: The Issue Fee and Protected as shown by the reco	is requested to apply the Issuublication Fee (if required) vords of the Upited States Pate	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if any) I from anyone o Office.	or to re-apply any previous ther than the applicant; a reg	ly paid issue fee to the applic sistered attorney or agent; or t	ation identified above. he assignee or other part
Authorized Signature	Rolled to	esol 1.			bruary /7, 200	

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